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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/537,719			ing Date 11/2006	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)								OTHER SMALL ENTITY ☐ OR SMALL I			
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)
Ø	BASIC FEE (37 CFR 1 16(a), (b), (	or (c))	N/A		N/A		N/A		1	N/A	300
	SEARCH FEE (37 CFR 1 16(k), (i), o	or (m))	N/A		N/A		N/A		1	N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p), e		N/A		N/A		N/A			N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 =		•		x \$ =		OR	x s =	
IND	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =		•		X \$ =		1	X \$ =	
	APPLICATION SIZE 37 CFR 1.16(s))	FEE sheer is \$29 addit 35 U.	ts of pape 50 (\$125 ional 50 : S.C. 41(	gs exceed 100 on size fee due for each on thereof. See CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL	300
APPLICATION AS AMENDED – PART II         OTHER THAN           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL ENTITY											
AMENDMENT	05/09/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 3	Minus	20	= 0		x \$ =		OR	X \$52=	0
	Independent (37 CFR 1,16(h))	• 2	Minus	<del>∷</del> 3	<b>=</b> 0	1	X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.1501)		Minus		-	1	X \$ =		OR	x s =	
	Independent (37 OFR 1 16(h))		Minus	***	-		X \$ =		OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))					]			]		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the entry in column 2, write 0" in column 3. Legal Instrument Examiner:  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20".  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".											

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